

**PUBLIC HEALTH AND MEDICAL (EMERGENCY FUNCTION 08)
SITUATION REPORT
EBOLA VIRUS DISEASE, 2014
DATE OF REPORT: OCTOBER 15, 2014
OPERATIONAL PERIOD: OCTOBER 13 - OCTOBER 17, 2014
CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
EMERGENCY MEDICAL SERVICES AUTHORITY**

EXECUTIVE SUMMARY

There are currently no suspected or confirmed cases of the Ebola Virus Disease (EVD) in California. A patient in Los Angeles County was confirmed negative for EVD, on October 9, and is being monitored until October 30 as a precaution. At present, the weekly situational assessment for the risk of Ebola infection in California is very low.

The outbreak of EVD in the West African nations of Guinea, Sierra Leone, and Liberia continues to expand but does not pose a significant risk to the United States. As of October 12, the World Health Organization has reported a cumulative total of 8997 suspect, probable, and confirmed cases and 4493 deaths. Based on the current situation in West Africa, the Centers for Disease Control and Prevention (CDC) consider the risk of importation of multiple cases of EVD into the United States to be very low. However, the outbreak is evolving, and this assessment may change.

A patient with confirmed EVD, diagnosed on September 30, in Dallas, Texas died on October 8. This was the first travel-related case detected outside of West Africa's outbreak region. One of the nurses that cared for the patient was diagnosed with EVD in Dallas, Texas on October 12, and is being treated. A second nurse that cared for the original patient in Dallas, Texas had confirmed EVD on October 15, and is being treated at Emory University Hospital in Atlanta, Georgia.

The CDC, California Department of Public Health (CDPH), and Emergency Medical Services Authority (EMSA) continue to prepare for the potentiality that a traveler returning to California from West Africa may be infected with EVD. These persons may develop illnesses and require medical evaluation. CDPH and local health jurisdictions are monitoring the situation closely and taking steps to keep the public safe.

CDPH continues to work with the healthcare community and local health jurisdictions to identify potential suspect cases and avoid spread of the disease. New guidelines and updated guidelines released by CDC are posted on the CDPH Communicable Diseases

Emergency Response (CDER) website available at: (<http://cdph.ca.gov/programs/cder/Pages/Ebola.aspx>). Likewise, EMSA has developed guidelines for Emergency Medical Services (EMS) personnel based on the recommendations of CDC. The guidelines have been distributed to Local Emergency Management Services Agency (LEMSA) Administrators, LEMSA Medical Directors and the Regional Disaster Medical Health Coordination (RDMHC) Program. Revisions will be made as necessary. The document is posted on EMSA's website at http://www.emsa.ca.gov/ebola_control.

CDPH continues to direct healthcare providers to follow protocols established by the CDC about how to detect and isolate patients who may have EVD and how they can protect themselves from infection. The CDC advises that healthcare providers in the U.S. should consider an EVD infection in the differential diagnosis of febrile illness, with compatible symptoms, in any person with recent (within 21 days) travel history in the affected West African nations. The CDC advises people returning from the affected areas who may be at high risk for EVD should be promptly isolated and their blood sent to CDC for testing.

DUTY OFFICERS ON CALL

Table 1. Duty Officers On Call		
Agency/Program	Duty Officer Information	
CDPH Duty Officer	Name:	Jerry Fuhrman
	Contact Information:	916-328-3605
EPO Duty Officer	Name:	John Wogec
	Contact Information:	916-328-9025
EMSA Duty Officer	Name:	Patrick Lynch
	Contact Information:	916-423-0911

CDPH/DHCS/EMSA CURRENT OPERATIONS

The CDPH internal workgroup to address all public health aspects of the EVD response meets bi-weekly.

Center for Infectious Diseases (CID) Division of Communicable Disease Control (DCDC)

- **Epidemiology**
 - Significant Issues: See documents listed below.
 - Critical Issues: None
 - Program Impacts:

- Continue to provide technical consultation for Ebola to local health departments
 - Monitoring reported Ebola cases and clinical cases
 - Expanding structure to include veterinary issues, animals and Ebola.
- **Surveillance**
 - All suspect cases must be reported to the local health jurisdiction. The local health jurisdictions will work with the DCDC clinical consultants to determine both the clinical criteria and risk factors for persons suspected of having EVD.
- **Laboratory**
 - Significant Issues:
 - The CDC is evaluating whether additional Laboratory Resource Network labs will be selected to perform the Ebola Zaire (EZ1) rRT-PCR assay. Currently the Los Angeles Public Health Lab (LA PHL) is one of 13 US labs approved for testing Ebola samples.
 - If local laboratories (other than Los Angeles) are contacted regarding suspect clinical samples for EVD testing, they should contact CDPH.
 - CDPH Viral and Rickettsial Disease Laboratory (VRDL) is performing a risk and resource assessment to determine feasibility and readiness to test patient samples. Ebola rRT-PCR kit will be received from CDC if this is to occur, and VRDL will be required to test and pass a validation panel prior to testing any suspect specimens.
 - Critical Issues:
 - Identification of usable Biosafety Level 3 containment laboratory to handle and inactivate clinical samples.
 - Program Impacts:
 - If testing is implemented at VRDL:
 - Likely have significant impact on personal protective equipment (PPE) supplies at VRDL. Other supplies needed for purchase will likely be minimal since kits are provided by CDC.

Infection Control

- Significant Issues: On October 3, CDC updated their *Interim Guidance for Environmental Infection Control in Hospitals for Ebola Virus*, to include that Ebola virus is classified as a Category A infectious substance by and regulated by the U.S. Department of Transportation's (DOT) Hazardous Materials Regulations (HMR, 49 Code of Federal Regulation (C.F.R.,

Parts 171-180). Any item transported offsite for disposal that is contaminated or suspected of being contaminated with a Category A infectious substance must be packaged and transported in accordance with the HMR. A special permit may be issued for waste haulers to transport such waste. Additional CDC guidance on the permitting process is anticipated.

- Critical Issues: None
- Program Impacts: No change

Information Officer Activities

- Key Messages
 - Ebola is NOT an airborne transmitted virus. Isolation and personal protective equipment are focused on CONTACT ISOLATION as recommended by the CDC.
 - CDPH and EMSA have a plan and processes for response to Ebola.
 - California's hospitals have the capability and capacity to manage Ebola patients.
- DCDC is receiving an increased number of public and healthcare partner-related questions via email and will be responding as time allows. The Richmond Campus Coordination Center (RCCC) is tracking the number of inquiries and will report next operational period.
 - Should the number of inquiries continue to rise, DCDC may request activation of a hotline and response team.

RCCC Activities

The RCCC remains activated at Level 1 with minimal staffing. Hours of operation are 8:00 am to 5:00 pm, Monday through Friday. The DCDC and CDPH Duty Officers provide 24/7 after-hours coverage.

- Significant Issues and Activities:
 - Participated on other conference calls led by CDC and the Association of State and Territorial Health Officers (ASTHO).
- Critical Issues: None
- Resource Requests/Needs:
 - PCA and Index for RCCC responders
 - World Courier account for Ebola shipping
 - Cache of cell phones for responders (received 2 from EPO, mobilized one from CDER to date)

Medical Countermeasures

- There are no updates at this time.

Community Mitigation

- There are no updates at this time.

Other DCDC Actions

Documents in Development, In Process of Update, or Released by CDPH

- CD Brief: Update on Ebola
- Medical Flyer for hospital E.D.s, and Clinics (English and Spanish Versions)
- Legislative Inquiry to CDPH regarding the EVD
- Response to Media Inquiries

Environmental Management Branch (EMB)

- CDPH EMB Medical Waste Management Program (MWMP) is developing an Ebola medical waste handling template consistent with CDC guidelines and in collaboration with the California Hospital Association that can be utilized by all hospitals. The draft document is currently with management for approval.
- The DOT has indicated that states may apply for exemptions to the Category A Infectious Substance packaging requirements.

Emergency Preparedness Office (EPO)

- CDPH and EMSA continue activation of the Medical and Health Coordination Center (MHCC) on October 8 to support activities of the RCCC and departmental programs, and enhance communication between emergency response and preparedness partners in California.
- MHCC and EPO management regularly participate in teleconferences regarding EVD with Federal, State, and local partners, assist in development of guidance documents, and coordinate CDPH program actions.
- MHCC maintains an incident on the Cal EOC website.
- CHPH has contracts in place with World Courier to accommodate transport of EVD samples.

Licensing and Certification Branch

- There is nothing to report from Licensing and Certification at this time regarding EVD.

CAHAN ALERTS

October 15, 2014

An All Facilities Letter (AFL-22) was issued to notify all primary care clinics about recent recommendations from the Centers for Disease Control and Prevention (CDC) regarding EVD information, detection protocols, and facility and provider preparedness.

EMSA CURRENT OPERATIONS

- EMSA has issued guidelines for EMS personnel based upon CDC recommendations through the RDMHC and Medical and Health Coordination (MHOAC) Programs. EMSA is prepared to continue coordination with EPO, RDMHC, and MHOAC Programs.

OPERATIONAL AREA CURRENT IMPACTS/ACTIONS

- Current impacts/actions for Operational Areas are not included in this situation report as local situation reports have not been requested or provided at this time.

STATE/REGION OVERVIEW

Table 2. State/Region Overview		
Region/State	Proclamation/Declaration	Activation
MHCC	None	Level I

PUBLIC INFORMATION

10/14/2014

David Bienick, KCRA-TV (Sacramento)
Mallory Russell, Capitol Television News Service (Sacramento)
Lisa Krieger, San Jose Mercury News

10/13/2014

Diane Ronnau, CBS Evening News and Derek Shore, KOVR-TV

10/9/2014

Marc Strassman, Etopia News
Dennis Romero, LA Weekly
Tracy Seipel, San Jose Mercury News

10/8/2014

Tracy Seipel, San Jose Mercury-News
Tom Kiskien, Ventura County Star
Eugene Tauber, The Morning Call (Allentown, PA)
Kibkabe Araya, The Daily Journal, (online)

10/7/2014

Thom Jensen, KXTV-TV (Sacramento)
Mike Casper, KCBS-FM (San Francisco)
Joe Grossman, Register-Pajaronian (Watsonville)

10/6/2014

Andrew Blankstein, NBC News
Christina Aanestad, KMUD-FM (Garberville)
Cathy Zhang, KSQQ-FM (San Jose)
Barnett Parker, KXTV-TV (Sacramento)
Tracy Seipel, San Jose Mercury News

Guidance Documents

CDC documents listed below are available on the CDC website (CDC.gov). CDPH documents listed below are available on the CDPH website (CDPH.ca.gov). The American Society of Microbiology (ASM) document can be found on the ASM website (www.asm.org).

Table 3. Guidance Documents			
Title	Source	Document Date	Distributed
Health Alert on Ebola HAN 00363	CDC	7/28/2014	8/1/2014
Infection Prevention and Control Recommendations for HCF	CDC	8/1/2014	8/1/2014, 8/8/2014
Case Definition (Person Under Investigation [PUI])	CDC	8/7/2014	8/8/2014

Interim Guidance for Specimen Collection, Transport, Testing and Submission for Patients with Suspected Infection with Ebola Virus Disease	CDC	8/6/2014	8/8/2014 8/15/2014
Case Definition (Person Under Investigation [PUI])	CDC	8/7/2014	8/15/2014
Guidance for Specimen Transport	DCDC	8/2014	8/15/2014 8/22/2014 8/29/2014
Interim Guidance for Specimen Collection, Transport, Testing and Submission for Patients with Suspected Infection with Ebola Virus Disease	CDC	8/22/2014	8/22/2014
Updated poster depicting the sequence for putting on and removing personal protective equipment (PPE)	CDC	8/18/2014	CD Brief 8/22/2014
Viral Hemorrhagic Fever Case Report Form	CDPH	8/22/2014	8/22/2014 8/29/2014
Case Definition (Person Under Investigation [PUI])	CDC	8/22/2014	8/22/2014 8/29/14
Interim Guidance for Environmental Infection Control in Hospitals for Ebola Virus	CDC	8/19/2014	CAHAN 8/22/2014 CD Brief 8/22/2013
Key Points – Ebola Virus Disease, West Africa	CDC	8/27/2014	8/28/2014
HAN 368: Ebola Response Update #4	CDC	8/28/2014	8/28/2014
Guidance for Safe Handling of Human Remains of Ebola Patients in U.S. Hospitals and Mortuaries	CDC	8/25/2014	CD Brief 8/29/2014
Interim Lab Guidelines for Handling/Testing EVHF Specimens	ASM	8/21/2014	
Interim Guidance for Specimen Collection, Transport, Testing and Submission for Patients with Suspected Infection with Ebola Virus Disease.	CDC	8/26/2014	8/29/2014

Interim Guidance for 9-1-1 public safety answering points (PSAPs) and emergency medical services (EMS) systems for managing patients with known or suspected Ebola in the United States	CDC	8/26/2014	8/29/2014
Ebola Flyer for Medical Centers	DCDC	8/2014	8/29/2014
Factsheet: Interim Guidance for Specimen Collection, Transport, Testing and Submission for Patients with Suspected Infection with Ebola Virus Disease	CDC	8/21/2014	8/29/2014
Interim Guidance for Monitoring and Movement of Persons with Ebola Exposure	CDC	8/22/2014	8/29/2014
CDC Infection Prevention and Control Recommendations for Hospitalized Patients with Known or Suspected Ebola Hemorrhagic Fever in U.S. Hospitals	CDC	8/19/2014	8/29/2014
CDC Advice for Colleges and Universities and Students about Ebola in West Africa	CDC	8/29/2014	9/5/2014
CDC Healthcare provider preparedness checklist for Ebola virus disease	CDC	9/12/2014	9/12/2014
CDC Healthcare facility preparedness checklist for Ebola virus disease	CDC	9/12/2014	9/12/2014
CDC HAN 371: Evaluating Patients for Possible Ebola Virus Disease: Recommendations for Healthcare Personnel and Health Officials	CDC	10/2/2014	10/2/2014

RESOURCE REQUESTS

None

FINANCIAL IMPACTS

None